T-466 P.003/017 F-896

OCT 28 2005

Attorney's Docket: 060012-0307440 Client Reference: DKT. 33 CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of:

Confirmation Number: 4462

GERSCHEFSKE et al.

Application No.: 10/743,255

Group Art Unit: 3764

Filed: December 23, 2003

Examiner: Hwang, Victor Kenny

For: STORABLE EXERCISE APPARATUS FOR PROFESSIONAL AND HOME USE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT/RESPONSE TRANSMITTAL

Transmitted herewith is an amendment/response for this application.

FEES

The fee for claims and extension of time (37 C.F.R. 1.16 and 1.17) has been calculated as shown below:

| | CLAIMS REMAINING AFTER AMENDMENT | PRE\ | EST NO. /IOUSLY D FOR | | ESENT KTRA | RA | TE. | - | ADDIT FEE | |
|-----------------------------------------|-------------------------------------------|------|-----------------------------|---|---------------|-----------|--------|---|--------------|------|
| TOTAL | 17 | | 21 | | 0 | × | 50.00 | _ | \$ | 0.00 |
| TOTAL | | | | | | × | | | | |
| INDEP. | 2 | _ | 3 | = | 0 | \$ | 200.00 | = | \$ | 0.00 |
| FIRST PRESENTATION OF MULTIPLE DEP. + | | | | | | | | | | |
| CLAIM | | | | | | \$ | 360.00 | = | <u> </u> | 0 00 |
| TOTAL ADDITIONAL CLAIM FEE GRAND TOTAL | | | | | | | | | \$ | 0.00 |
| | | | | | | | | | \$ | 0.00 |

GERSCHEFSKE et al. - - 10/743,255 Attorney's Docket: 060012-0307440

FEE PAYMENT

Authorization is hereby made to charge the amount of \$0.00 to Deposit Account No. 033975. Charge any additional fees required by this paper or credit any overpayment in the manner authorized above. A duplicate of this paper is attached.

Date: October 28, 2005

PILLSBURY WINTHROP SHAW PITTMAN LLP THOMAS P. HILLIARD

P.O. Box 10500

McLean, VA 22102 Tel. No. 703 770.7900 Fax No. 703 770.7901

Reg. No. 40330

Tel. No. 703 770.7591

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|-------------------------------------------------------|-------------------------------------------|-----|-------------------------------|---|---------------|---------|--------|----------|--------|------|
| TOTAL | 17 | _ | 21 | _ | ۵ | × \$ | 50.00 | = | \$ | 0.00 |
| INDEP. | 2 | _ | 3 | | 0 | × \$ | 200.00 | = | \$ | 0.00 |
| FIRST PRESENTATION OF MULTIPLE DEP. + CLAIM \$ 360.00 | | | | | | | | = | \$ | 0.00 |
| TOTAL ADDITIONAL CLAIM FEE | | | | | | | | | \$ | 0.00 |
| GRAND TOTAL | | | | | | | | | \$ | 0.00 |

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AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated July 28, 2005, please amend the aboveidentified application as follows:

> RECEIVED OIPE/IAP

OCT 3 1 2005